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FAX TRANSMISSION**DATE:** February 20, 2008**PTO IDENTIFIER:** Application Number 10/725,859-Conf. #2817
Patent Number**Inventor:** Philip BORGHESANI et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** LAHIVE & COCKFIELD, LLP

John S. Curran

PHONE: (617) 994-0854**Attorney Dkt. #:** MWS-093**PAGES (Including Cover Sheet):** 23**CONTENTS:** Transmittal (1 page)
Fee Transmittal (1 page, in duplicate)
Amendment and Response to Non-Final Office Action (17 pages)
Three-Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
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PTO/SB/97 (09-04)

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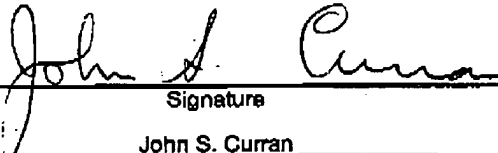
Application No. (if known): 10/725,859

Attorney Docket No.: MWS-093

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Transmittal (1 page)

Fee Transmittal (1 page, in duplicate)

Amendment in Response to Non-Final Office Action (17 pages)

Three-Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

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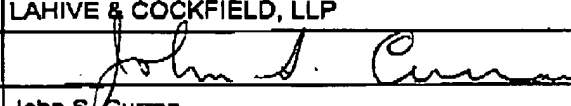
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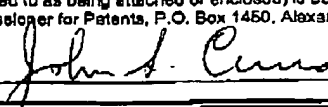
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| | | |
|--|------------------------|------------------------|
| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | Application Number | 10/725,859-Conf. #2817 |
| | Filing Date | December 1, 2003 |
| | First Named Inventor | Philip BORGHESANI |
| | Art Unit | 2194 |
| | Examiner Name | V. H. Nguyen |
| Total Number of Pages in This Submission | Attorney Docket Number | MWS-093 |

| ENCLOSURES (Check all that apply) | | |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Transmission (1 page) |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
|--|---|-----------------|
| Firm Name | LAHIVE & COCKFIELD, LLP | |
| Signature |  | |
| Printed name | John S. Curran | |
| Date | February 20, 2008 | Reg. No. 50,445 |

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| I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300 at Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. | |
| Dated: February 20, 2008 | Signature:  (John S. Curran) |

FEB 20 2008

PTO/SB/17 (10-07)

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| Effective on 12/08/2004, Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008 | | Complete if Known Application Number 10/725,859-Conf. #2817 Filing Date December 1, 2003 First Named Inventor Philip BORGHESANI Examiner Name V. H. Nguyen Art Unit 2194 Attorney Docket No. MWS-093 | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | | |
| TOTAL AMOUNT OF PAYMENT | (\$) | 1,050.00 | |

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| METHOD OF PAYMENT (check all that apply) | |
| <input type="checkbox"/> Check <input checked="" type="checkbox"/> Deposit Account <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): | Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Credit any overpayments |

| | | | | | | | |
|---|---|---------------------------------|--|---|---|--|--|
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | |
| | FILING FEES Application Type Fee (\$) Small Entity Fee (\$) | | SEARCH FEES Fee (\$) Small Entity Fee (\$) | | EXAMINATION FEES Fee (\$) Small Entity Fee (\$) | | Fees Paid (\$) |
| Utility | 310 | 155 | 510 | 255 | 210 | 105 | |
| Design | 210 | 105 | 100 | 50 | 130 | 65 | |
| Plant | 210 | 105 | 310 | 155 | 160 | 80 | |
| Reissue | 310 | 155 | 510 | 255 | 620 | 310 | |
| Provisional | 210 | 105 | 0 | 0 | 0 | 0 | |
| 2. EXCESS CLAIM FEES | | | | | | | |
| Fee Description | | | | | | | Small Entity Fee (\$) Fee (\$) |
| Each claim over 20 (including Reissues) | | | | | | | 50 25 |
| Each independent claim over 3 (including Reissues) | | | | | | | 210 105 |
| Multiple dependent claims | | | | | | | 370 185 |
| Total Claims 32 - 36 = | | Extra Claims Fee (\$) | | Fee Paid (\$) | | Multiple Dependent Claims Fee (\$) Fee Paid (\$) | |
| HP = highest number of total claims paid for, if greater than 20. | | | | | | | |
| Indep. Claims 4 - 4 = | | Extra Claims Fee (\$) | | Fee Paid (\$) | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| Total Sheets - 100 = | | Extra Sheets / 50 = | | Number of each additional 50 or fraction thereof (round up to a whole number) x | | Fee (\$) Fee Paid (\$) | |
| 4. OTHER FEE(S): | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 1253 Extension for response within third month | | | | | | | 1,050.00 |

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|-------------------------------------|---|-----------------------------|--|
| SUBMITTED BY | | | |
| Signature John S. Curran | Registration No. (Attorney/Agent) 50,445 | Telephone (617) 994-0854 | |
| Name (Print/Type) John S. Curran | | Date February 20, 2008 | |

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| Dated: February 20, 2008 | Signature: John S. Curran (John S. Curran) |